(Original, Design, National Stage of PCT, Divisional, Continuation or C-I-P Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF INHIBITING ANGIOGENESIS AND TUMOR GROWTH AND PREVENTING TUMOR **GROWTH AND METASTASES**

| This declaration is of the following type: [X] original |
|---|
| [] design [] national stage of PCT. |
| [] divisional |
| [] continuation [] continuation-in-part (C-I-P) |
| the specification of which: (complete (a), (b), or (c)) |
| (a) [] is attached hereto. (b) [X] was filed on June 4, 1998 as Application Serial No. 09/090,757. (c) [] was described and claimed in PCT International Application No. filed on and was amended on (if applicable). |
| Acknowledgement of Review of Papers and Duty of Candor I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the patentability of the subject matter claimed in this application in accordance with Title 37, Code of Federal Regulations § 1.56. |
| [] In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.98. |
| Priority Claim |

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT International Application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International Application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application on which priority is claimed

(complete (d) or (e))

(d) [X] no such applications have been filed.

I O J

=

(e) [] such applications have been filed as follows:

| DDIOD EODEIGN/E | PCT APPLICATION(S) FILED WITHIN 12 MON | NTHS (6 MONTHS FOR DESIGN) PRIOR TO | SAID APPLICATION | |
|-----------------|--|--------------------------------------|-------------------------------------|--------------------------------------|
| | APPLICATION NO. | DATE OF FILING (day, month, year) | DATE OF ISSUE (day, month, year) | PRIORITY CLAIMED UNDER 35 USC 119 |
| COUNTRY | AFFLICATION NO. | | | []YES NO [] |
| | | | | []YES NO [] |
| | | | | []YES NO [] |
| - DODEVOL AD | PLICATION[S], IF ANY, FILED MORE THAN | 12 MONTHS (6 MONTHS FOR DESIGN) PR | OR TO SAID APPLICATION | |
| LL FOREIGN AP | PLICATION[5], II ANT, TIELD MORE THAT | | | [] YES NO [] |
| | | | | [] YES NO [] |
| | | | | [] YES NO [] |

Claim for Benefit of Prior U.S. Provisional Application(s)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

| application(s) listed below: | |
|--------------------------------|-------------|
| Provisional Application Number | Filing Date |
| | |
| | |
| | |
| | |
| | |

Claim for Benefit of Earlier U.S./PCT Application(s) under 35 U.S.C. 120

(complete this part only if this is a divisional, continuation or C-I-P application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

| (Application Serial No.) | (Filing Date) | (Status) (patented, pending, abandoned) |
|--------------------------|---------------|---|
| | | |
| (Application Serial No.) | (Filing Date) | (Status) (patented, pending, abandoned) |

Power of Attorney

As a named inventor, I hereby appoint Dana M. Raymond, Reg. No. 18,540; Frederick C. Carver, Reg. No. 17,021; Francis J. Hone, Reg. No. 18,662; Joseph D. Garon, Reg. No. 20,420; Arthur S. Tenser, Reg. No. 18,839; Ronald B. Hildreth, Reg. No. 19,498; Thomas R. Nesbitt, Jr., Reg. No. 22,075; Robert Neuner, Reg. No. 24,316; Richard G. Berkley, Reg. No. 25,465; Richard S. Clark, Reg. No. 26,154; Bradley B. Geist, Reg. No. 27,551; James J. Maune, Reg. No. 26,946; John D. Murnane, Reg. No. 29,836, Henry Tang, Reg. No. 29,705, Robert C. Scheinfeld, Reg. No. 31,300, John A. Fogarty, Jr., Reg. No. 22,348, Louis S. Sorell, Reg. No. 32,439 and Rochelle K. Seide Reg. No. 32,300 of the firm of BAKER & BOTTS, L.L.P., with offices at 30 Rockefeller Plaza, New York, New York 10112, as attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith

| SEND CORRESPONDENCE TO: BAKER & BOTTS, L.L.P. 30 ROCKEFELLER PLAZA, NEW YORK, N.Y. 10112 CUSTOMER NUMBER: 21003 | DIRECT TELEPHONE CALLS TO: BAKER & BOTTS, L.L.P. (212) 705-5000 |
|---|---|
| COSTOMERTOMESE | |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section

BAKER & BOTTS, L.L.P.
FILE Na: 31386

1001 of Title 18 of the United State code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| FULL NAME OF SOLE | LAST NAME FIRST NAME MIDDLE NAM | | MIDDLE NAME | | |
|--|---------------------------------|--------------------------|------------------------|--|--|
| OR FIRST INVENTOR | Coller | Barry | | | |
| RESIDENCE & CITIZENSHIP | CITY | STATE or FOREIGN COUNTRY | COUNTRY OF CITIZE | NSHIP | |
| | New York | New York | US | | |
| POST OFFICE | POST OFFICE ADDRESS | CITY | STATE or COUNTRY | ZIP CODE | |
| ADDRESS | 1160 Park Avenue, Apt. 6A | New York | New York | 10029 | |
| 9 23 48 | SIGNATURE OF INVENTOR | | | | |
| TULL NAME OF SECOND OINT INVENTOR, IF ANY | Jordan | FIRST NAME Robert | MIDDLE NAME | | |
| RESIDENCE & CITIZENSHIP | CITY | STATE or FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP | | |
| | Malvern | Pennsylvania | US | | |
| POST OFFICE | POST OFFICE ADDRESS | CITY | STATE or COUNTRY | ZIP CODE | |
| ADDRESS | 905 Warrior Road | Malvern | Pennsylvania | 19355 | |
| 9/24/97 | Robert To dai | | | | |
| ULL NAME OF THIRD | LAST NAME | FIRST NAME | MIDDLE NAME | ······································ | |
| OINT INVENTOR, IF ANY | Varner | Judith | | | |
| ESIDENCE & CITIZENSHIP | CITY | STATE or FOREIGN COUNTRY | COUNTRY OF CITIZEN | NSHIP | |
| | Encinitas | California | us | | |
| OST OFFICE | POST OFFICE ADDRESS | CITY | STATE or COUNTRY | ZIP CODE | |
| DDRESS | 327 via Andalusia | Encinitas | California | 92024 | |
| ATE | SIGNATURE OF INVENTOR | | | <u></u> | |
| 9/25/98 | Judit a Varner | ····· | | | |
| ULL NAME OF FOURTH DINT INVENTOR, IF ANY | LAST NAME | FIRST NAME | MIDDLE NAME | | |
| ESIDENCE & CITIZENSHIP | CITY | STATE or FOREIGN COUNTRY | COUNTRY OF CITIZEN | COUNTRY OF CITIZENSHIP | |
| OST OFFICE DDRESS | POST OFFICE ADDRESS | CITY | STATE or COUNTRY | ZIP CODE | |
| ATE | SIGNATURE OF INVENTOR | | <u> </u> | <u></u> | |
| ULL NAME OF FIFTH DINT INVENTOR, IF ANY | LAST NAME | FIRST NAME | MIDDLE NAME | | |
| ESIDENCE & CITIZENSHIP | CITY | STATE or FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP | | |
| OST OFFICE DDRESS | POST OFFICE ADDRESS | CITY | STATE or COUNTRY | ZIP CODE | |
| ATE | SIGNATURE OF INVENTOR | | | | |
| ULL NAME OF SIXTH DINT INVENTOR, IF ANY | LAST NAME | FIRST NAME | MIDDLE NAME | | |
| ESIDENCE & CITIZENSHIP | CITY | STATE or FOREIGN COUNTRY | COUNTRY OF CITIZEN | COUNTRY OF CITIZENSHIP | |
| OST OFFICE DDRESS | POST OFFICE ADDRESS | СІТҮ | STATE or COUNTRY | ZIP CODE | |
| ATE | SIGNATURE OF INVENTOR | | <u> </u> | <u> </u> | |